

# Indiana's Array of Services for Persons with Developmental Disabilities from the Consumers' Perspective

DRAFT - February 18, 2003

**Definition/General Criteria:** *Meet the State's definition of Developmental Disabilities (DD)*

Category	Eligibility Criteria (categorical and financial)		Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Initial Gates</b>								
Medicaid	Income and assets less than \$1,500; also need determination of disability	None from the consumer perspective	Local Division of Family Resources (DFR) Office	Application, provide financial records; consumer/family is required to bring lots of documentation with little guidance; follow-up feedback is minimal and inconsistent	Multiple providers	DFR Caseworker	Reviewed every year by the same caseworker	Federal and State Tax
Disability Determination	Doctor's determination of disability; need to have an evaluation by personal physician; DFR case worker does a social history; physical exam results and social history are forwarded to the medical review team (MRT) in Indianapolis	None from the consumer perspective	Local DFR, Social Security Office	Apply at DFR; doctor fills out paperwork; paperwork to MRT; this process can take up to a year to complete	Someone at MRT who does not know the consumer applying for disability determination	DFR caseworker (caseworkers have such large case loads that they do not have time to follow-up with MRT status)	None	Medicaid
Waivers	Need to be Medicaid eligible with a developmental disability; also need to meet the level of care criteria for the applicable waiver	Area Agency on Aging (AAA) and the Bureau of Developmental Disabilities (BDDS); sometimes information is provided by First Steps and/or the schools but is very inconsistent across the state	AAA and BDDS offices	Fill out application at either AAA or BDDS; apply for Medicaid at DFR; disability determination - MRT; determination of DD by BDDS; determination for the waiver is determined by either the targeted case manager or the Office of Medicaid Policy and Planning (OMPP); this process involves multiple locations, multiple people, and can take a year; a consumer may go through this process involving several months with the outcome being waiting list status	Consumer may chose the provider, but provider must be approved by BDDS	Case manager may work for the provider, which some consumers believe is a conflict of interest; private providers, also some AAAs are providers	Case manager or family; Bureau of Quality Improvement Services (BQIS)	Medicaid
SSI	Must have a medically determined physical or mental impairment that can be expected to result in death or has lasted for a continuous period of not less than 12 months; inability to engage in any substantial gainful activity	Social Security Administration (SSA)	Social Security Office	Doctor determination; based on personal physician evaluation; sent for review to MRT (this is the same process as disability determination); if MRT has questions, consumer can be sent to another physician who may not know the consumer; another concern is that the people who review the information are not physicians	SSA	No case management exists for SSI	SSA	SSA

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<b>Additional Services</b>								
Food and nutrition	Age (for home delivered meals, must be 60+ years; financial criteria (for food stamps))	Doctor re: home delivered meals; DFR for food stamps	Hospital; DFR for food stamps; AAA for home delivered meals	Same as Medicaid (for food stamps); apply for home delivered meals through AAAs	Hospitals; AAA; some local food pantries	None or AAA	No formal process; an individual AAA may have a quality improvement review process	Title III for Older Americans; CHOICE; Medicaid; Private
Housing	Based on financial need	Very difficult for consumers to obtain information about housing	Housing authority; HUD	Application process; major waiting list	Private or government owned	None or Landlord	Have regular inspections by the entity involved in funding the housing	Section 8 (which is limited)
Transportation	If medically necessary, may be covered through Medicare or Medicaid	Different everywhere you go	None	Fill out the required paperwork for the provider	City; Private	None	None	Medicaid; grant money; Medicare; private
Employment	Determination of disability	Vocational Rehabilitation (VR) office or the school	VR office	VR application process	Multiple providers depending on the geographical area (e.g., Goodwill, Crossroads, Anthonie Wayne Services)	VR counselor; contract with the provider agency which will provide the case manager for the specific employment situation	Not sure	State and Federal
Health care	The same process for Medicaid if that is the consumer's funding option; private insurance if applicable	Depends on funding source	Varies depending on whether the consumer needs to receive healthcare funded by Medicaid or private insurance via family or employer	Application; financial eligibility, same as Medicaid; or process required by private insurance if applicable	Multiple providers - doctors; hospitals; home health care (sometimes it is challenging to find a provider in the consumer's community who takes Medicaid patients)	None	None	Medicaid; Medicare (depending on consumer's age being 65+ or disability determination for more than two years); or private insurance
Other services								

# Indiana's Array of Services for Seniors from the Consumers' Perspective

DRAFT - February 18, 2003

**Definition/General Criteria:** Based on age - for some programs, the age is 65 years or older; other programs (e.g., Older Americans Act, Social Security Block Grant (SSBG), CHOICE - age 60 years or older)

Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Initial Gates</b>								
Medicaid	Based on income and assets; Entitlement if meet eligibility criteria	Nursing homes; Social Security; Area Agencies on Aging (AAA); hospitals; Division of Family Resources (DFR) offices	DFR office in each county; consumer can go to any county regardless of residence	Need to provide documentation to verify income and assets; if qualify with spend down, must document medical expense monthly; need to resubmit eligibility with documentation on an annual basis	Multiple providers; some of the services require prior approval before the service can be rendered (e.g., mental health services); some providers limit the number of Medicaid clients they can serve (this is a significant problem for this population)	DFR caseworker; large case loads; rarely does the DFR caseworker come to the home (this is a challenge for some seniors)	Supervisor of the case worker on a select number of cases; State and Federal follow-up quality assurance occurs on a select number of cases (consumers do not know much about this process)	State and Federal
Disability Determination	Most seniors qualify without a "disability label"							
Medicaid Waivers	Medicaid eligibility; have to have three Activities of Daily Living (ADL) impairments; the physician needs to complete the 450B form (which is the same that is completed for nursing home placement)	Green Book		AAA case manager goes to the home and fills out the paperwork; then the consumer can choose his/her care manager once enrolled; consumer can go through the enrollment process and then find out that the outcome is a waiting list status; the reality is that the process is somewhat different across the State depending the specific procedures for the AAA in that area	After enrollment, there are multiple providers (these providers are certified through the State to be eligible to provide services)	Private or through AAA	Each AAA must do quality improvement (QIP) for at least 10% in at least each funding category; State requires a quarterly quality improvement report; State can also access client files at any time	State and Federal
SSI	Based on income and assets; also need to go through the disability determination process	Can take this application via the telephone	Social Security Office (SSO) (Sometimes out of county which may involve a transportation barrier)	Same as Medicaid, including the disability determination process	N/A	N/A	Consumers not aware of a quality assurance process	Federal
CHOICE	Based on at least two ADL impairments; income does not exclude someone but impacts cost share for the client	Nursing homes; Social Security; AAA; hospitals; DFR	AAA case worker goes to the home	Paperwork completed by the AAA case worker; physician completes the 450B; eligibility screen is completed	Multiple providers	AAA (No option to choose a private case manager)	Same as Waivers	State; Certain portion of the allocated CHOICE goes to the elderly and a certain portion to the disabled; limited funds available
Older Americans Act	Over 60 years old; no income criteria; self declaration (do not assess for disability determination); do complete an eligibility screen for any in-home services	Nursing homes; Social Security; AAA; hospitals; DFR	AAA case worker goes to the home	Paperwork completed by the AAA case worker; physician completes the 450B; eligibility screen is completed	Multiple providers	AAA (No option to choose a private case manager)	Same as Waivers	85% federal, 5% State, Remaining 10% can be local, in-kind or cash
Adult Protective Services	Abuse substantiated	Nursing homes; Social Security; AAA; hospitals; DFR; plus local and state police	Prosecutor's office is in charge of the process; investigator is sent to the home in most instances	Prosecutor's office	Prosecutor's office	Cooperative with AAA	State quality assurance	State
Social Security Block Grant (SSBG)	Over 60 years or disabled	Nursing homes; Social Security; AAA; hospitals; DFR	AAA case worker goes to the home	Paperwork completed by the AAA case worker; physician completes the 450B; eligibility screen is completed	Multiple providers	AAA (No option to choose a private case manager)	Same as Waivers	90% federal, 10% local level

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Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Additional Services</b>								
Food and Nutrition - Food Stamps/Card	Based on income and resources as well as household composition	Nursing homes; Social Security; AAA; hospitals; DFR	DFR	Same as Medicaid	Groceries, etc.	N/A	Same as Medicaid	Federal
Food and Nutrition - Older Americans Meals on Wheels	Over 60 years; meet homebound criteria; varies	Nursing homes; Social Security; AAA; hospitals; DFR	AAA	Varies somewhat from AAA to AAA, some use the eligibility screen, must be determined to be home bound	Multiple providers; some AAA provide the service while other subcontract	N/A	AAA quality improvement process (QIP); actual process varies but required to do QIP	Varies
Other Home Delivered Meal Programs	Varies from community to community	Nursing homes; Social Security; AAA; hospitals; DFR	Contact the agency who provides the meals; this differs in each community	Contact the agency who provides the meals; this differs in each community	Multiple providers	N/A	Varies	Varies in each community
Transportation (many different systems)								
Housing (many different systems)								

# Indiana's Array of Services for Children at Risk from the Consumers' Perspective

DRAFT - February 18, 2003

**Definition/General Criteria:** *Victim of abuse, neglect or other crime; truancy and academic failure; delinquent act; child use of drugs or alcohol; family economic stress; probation or parole violation; children in hospital/institution*

Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Initial Gates</b>								
Medicaid	Income/Resources (State sometimes)	Hospitals, Physicians, Community Health Centers, Community Action Agencies, County Health Departments, Childcare Providers, Local Offices of the Division Family Resources (DFR), Schools, First Steps Councils, Step Ahead Councils	Local DFR, DFR Mail-in and Call-In Center, Hospitals, Community Health Centers, Mental Health Centers, Head Start Centers, WIC Centers	Income verification; number in family verification; and residency proof	Multiple (some don't take Medicaid)	DFR caseworker, primary care physician (PCP)	Supervisor quality control (QC), State QC, Federal QC	State and Federal
Disability Determination	Lifelong - Short (four years)	Hospital, First Steps Councils, Physician's Office, Bureau of Disability Determination, Local DFC Offices, Community Services Councils, Community Mental Health Centers, Community Health Centers, Centers for persons with developmental disabilities, Community Action Agencies	Bureau of Developmental Disabilities Services (BDDS) and DFR	Doctor verification (450B), medical reports (doctor or hospital)	N/A	DFR (case worker), BDDS (case manager)	Supervisor QC, State QC, Federal QC	State and Federal
Waivers	Medicaid eligibility (SB 30) - disability determination	First Steps, Doctor's Office, Hospital	BDDS, some Area Agencies on Aging (AAA) and AAA (DFR)	Doctor verification (450B), medical reports (doctor or hospital), and eligibility screen	Multiple	Targeted TCM, AAA - all MFC, and AAA - some DD	Supervisor QC, State QC, Federal QC, and QIP	State and Federal
SSI	Some parent's assets set aside - same as 65+	First Steps, Doctor's Office, Hospital	Social Security	Medical certification and redeterminations	No providers	Social Security (redetermines)		Federal
Children with Special Health Care Needs (CSHCN)	Income/Resources - household comp.	First Steps, Hospital, Local DFR Offices, Schools	State Department of Health, CSHCN	Verification of medical/income/resources	Multiple	Riley Hospital	Unknown	Federal and State
Abused or Neglected Child	1) Abuse or neglect substantiation with an Informal Adjustment and accompanying services; 2) Court adjudication of abuse or neglect with accompanying services	Healthcare Professionals, Schools, Prevent Child Abuse Indiana (and local chapters), Law Enforcement Agencies, Community Social and Human Service Agencies, and Probation Departments	Local Offices of Child Services, County Prosecutor, Local Law Enforcement Agencies	Local DCS; investigation or court adjudication	Multiple	Local DCS in conjunction often with service providers	Court Appointed Special Advocates, Guardian ad Litem, Family Case Manager Supervisors, Local DCS Directors, DCS Quality Assurance (child welfare) Reviews	County, State, and Federal

# Indiana's Array of Services for Children at Risk from the Consumers' Perspective

DRAFT - February 18, 2003

**Definition/General Criteria:** *Victim of abuse, neglect or other crime; truancy and academic failure; delinquent act; child use of drugs or alcohol; family economic stress; probation or parole violation; children in hospital/institution*

Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
Delinquent Children	1) Admit to allegation and agree to an Informal Adjustment, with possible service conditions; 2) Court adjudication of a delinquent act	Local Law Enforcement Agencies, Schools, Parents, County Prosecutor Office	Juvenile Probation Department	Adjudication or admission of wrongdoing	Probation Department and contracted home based service providers as well as placement facilities	Probation Officers	Court Appointed Special Advocates, Guardian ad Litem, Probation Officer Supervisors, Chief Probation Officers, and upon request from the Judge, Quality Assurance Reviews by the DFC	County, State and Federal
Children in Academic Failure or Children with the Potential for Academic Failure	Assessment and Development of Individual Education Plan	Schools, Offices of DFR, Community Mental Health Centers, First Steps Councils, Step Ahead Councils	Schools	Assessment and individual education plan	Schools with various other supportive service providers and family members	School Staff	Parents, School and Department of Education	County, State and Federal
Serious Emotionally Disturbed Children	Diagnosis by a mental health professional	Local Community Mental Health Centers, Local DFR Offices, Probation Departments, Law Enforcement Agencies, Schools, Community Health Centers Community Mental Health Associations, School Staff and Family	Community Mental Health Centers	Diagnosis and financial eligibility determination process	Community Mental Health Centers and various selected service providers	Community Mental Health Centers, but also other community providers that serve as a participant in wraparound services	Internal Quality Assurance Components	County, State and Federal
<b>Additional Services</b>								
Food and Nutrition	Eligibility Criteria (categorical and financial)	Local DFR Offices, County Health Departments, OB/GYN and other pediatric and PCP	WIC sites and MCH sites	Financial determination and pregnancy	Various	PCP		State and Federal

## Key Barriers:

- Outreach must be expansive
- Providers of services not available in all counties
- Meeting the child's needs is based on the parent's abilities
- Once needs are identified, multiple systems confuse parents
- Funds are so categorical, that blending or braiding of funds is a major obstacle
- Current fiscal policy does not promote prevention, early intervention, and community-based services

# Indiana's Array of Services for Persons with Mental Illness from the Consumers' Perspective

DRAFT - February 18, 2003

**Definition/General Criteria:** *Mental Illness, limitations in two areas, duration > 12 months; Chronic Gambling Disorder; Substance Related Disorder*

Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Initial Gates</b>								
Medicaid	Disabled; income and resources	Community mental health center (CMHC); National Alliance for the Mentally Ill (NAMI); Mental Health Association (MHA)	County Division of Family Resources (DFR) office	Can require disability to be evaluated by one or more physicians; Medicaid application process can be started prior to discharge from mental hospital, but is complex and seldom completed at discharge; creating lapse in physical health care and medications at State expense.	Community mental health centers and hospitals; very few dentists and physicians	CMHC sometimes	Don't know	Limited reimbursement to CMHC for support in applying, Federal and State
Disability Determination	Declaration mental illness leads to discrimination which discourages consumers from applying	Consumers are advised to take an attorney; contact Indiana Legal Services, Inc.	DFR for Medicaid; Social Security Administration for SSI or SSDI	If illness is schizophrenia or bipolar disorder, DFR caseworker can mark application "expedited" to request quick review by Medical Review Board; Medicaid and SSI/SSDI are separate processes--could be found eligible for one and not the other	Frequent denials require multiple appeals and a disability determination hearing by a judge	Case manager goes with the consumer to the hearing	Don't know	Medicaid, Federal and State; SSDI is from the disabled person's payroll disability insurance program; SSI is supplemental Security insurance paid by taxpayers
Waivers are not allowed for adults with mental illness due to Federal IMD (Institution for Mental Disease) law	Due to cognitive impairments, many consumers lose identification. Must get birth certificate, Social Security card, etc, replaced before entering any of the doors above. Eligibility for any identification requires some other identification. Can be a major hurdle for a person with a serious mental illness.							
SSI	Disability determination repeated; must meet low income criteria for last 40 quarters	CMHC; family or advocates (lawyer)	Social Security Administration	Individuals with SSI have payments stopped when in a state hospital, to be resumed if discharged within 12 months; otherwise, individuals leaving state hospitals must wait for discharge before being able to apply--resulting in no source of income for rent, etc.	All tax payers pay for this program for persons with disabilities who do not qualify for SSDI	Case manager goes with the consumer to the hearing	Three year wait	Federal
Mental Health Services and Medications	Intake and assessment	Advocacy groups	CMHC, 30 sites	Mental health treatment is denied to many people who do not have Medicaid or other insurance because centers have limited funds to see indigent patients; consumer who is impoverished gets state Hoosier Assurance Plan (HAP) funding, but is locked into HAP enrollment provider for one year	Community mental health centers; local community hospitals; drug companies offer some medications for indigent	Sometimes	Quality Improvement monitoring by Division of Mental Health and Addiction (DMHA), Report Cards; many consumers and family members report that DMHA quality oversight is inadequate	State; HAP; Medicaid; Medicare; private insurance (very limited); no parity; all programs have inadequate funding; lack of availability and access; no uniformity
Veterans Benefits	Armed services; honorable discharge; 180 days active duty; disabled	Legion; VA Hospital; VFW	VA Hospitals	Forms lines waiting	VA	VA provides some; sometimes the VA contracts case management out to a CMHC	Don't know	Federal

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Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Additional Services</b>								
Food and Nutrition	Income and resources criteria	Service agencies	Food banks; food stamps; DFR; soup kitchens; meals on wheels; Township Trustee	Application forms	Food banks; food stamps; DFR; soup kitchens; meals on wheels; Township Trustee	Referral and linkage to agencies if provided in the treatment plan	Don't know	State, faith based, non profits
Housing	All different eligibility criteria result in discrimination loop holes	Need credit references; discriminate by requiring a monthly income =3x the monthly rent	CMHCs; Public Housing Authorities; Community Action Programs; Township Trustee	Missions; shelters; county homes; bus huts; city and county jails; Residential Care Assistance Program, Section 8; long waiting lists and enrollments frozen	Age discrimination - elderly only	Referral and linkage to agencies if provided in the treatment plan	For housing discrimination due to disability contact the Indiana Civil Rights Commission	Federal; State; county; township, faith based
Transportation	Fall through cracks - some is elderly only	CMHC referral; if case management in treatment plan; linkage to services if available in community	None in some counties, limited in rural; scheduling limited in urban	If has SSI or proof of disability, individual may get discounted fair; Medicaid pays for transportation to medical or clinical mental health appointments; lack of accessible/affordable transporation limits ability to work	Public and faith based; lack of uniformity, coordination, collaboration, and cooperation is a major barrier to employment	Referral and linkage to agencies if provided in the treatment plan	Don't know	Federal; State; county; township; faith based
Employment	Requirement to disclose disability of a mental illness causes some to be reluctant to obtain services	CMHC referral; if case management in treatment plan; linkage to services if available in community	Work Force One; Vocational Rehabilitation; at the employment site	Transitional Employment - CMHC with no funding; Supported Employment - vocational rehabilitation contracts with the CMHC or other provider		Referral and linkage to agencies if provided in the treatment plan	Quality and availability varies across State and programs	Funding support to provide support services is nonexistent or inadequate
Health care	Eligibility is related to having coverage through Medicaid, Medicare or private insurance except when being served at a hospital ER	CMHC referral; if case management in treatment plan; linkage to services if available in community	Medicaid office through Health Care Select if you have been determined eligible for Medicaid coverage	See Medicaid. Medicare becomes entitlement after 24 months on Federal disability SSDI	Few providers accept Medicaid; limited access to urban clinics without Medicaid in place	Drug samples, coupons for indigent provided by drug companies	Varies	County taxes if no insurance
Other Sections: Childcare while going to services or work; energy assistance; phone service assistance	Income and resources criteria	Poor information on access to other services needed	Community Action Program; Ameritech Life Line/Link Up; Step Ahead	Complete an application at each site: Community Action Program; Ameritech Life Line/Link Up; Step Ahead	Community Action Program; Ameritech Life Line/Link Up; Step Ahead	Referral and linkage to agencies if provided in the treatment plan	No uniformity, some great successes, but few and far between	All programs inadequate funding, lack of availability and access, no uniformity

## Key Barriers:

- The System is more disabled and disabling than the consumer of the services
- Too many doors to go through
- Too many different systems
- Many of the doors unavailable in many communities
- Too many funding streams and eligibility barriers
- The few excellent programs are done using Evidence Based Practices and dedicated, well-trained providers
- Multiple referrals to someone else
- Lack of uniformity, coordination, and cooperation



# Indiana's Array of Services for Persons with Physical Disabilities from the Consumers' Perspective

DRAFT - February 18, 2003

**Definition/General Criteria:** *Typically based on limitations in Activities of Daily Living (ADLs)*

Category	Eligibility Criteria (categorical and financial)	Information/ Referral/ Advocacy	Enrollment Sites	Enrollment Process	Providers	Case Management	Quality Oversight	Funding Support
<b>Initial Gates</b>								
Medicaid	Based on income and assets; need to prove where every penny is spent; must also produce paperwork for dependent children; child support is counted as income whether it is received or not	During the initial request period, it is difficult for consumers to get clear information about how to proceed; long waits and lack of information can create significant hardships	Division of Family Resources (DFR) offices; not all sites are accessible (e.g., North Meridian office is not on the accessible bus route; some DFR offices in the rural areas are not wheelchair accessible from the consumer perspective	Take required documents to the DFR office; DFR office initiates the disability determination process but this can take a long time; too much paperwork; consumer can send faxes but frequently gets feedback that the documents were not received; process frequently takes too much time; this can be a significant hardship for a consumer who has immediate needs; even with a prior authorization, consumer may be notified that a decision has been suspended (requires more information)	Far too few providers who accept Medicaid; results in the provider having too much control over the consumer's life (i.e., cannot get you out of bed until noon); does not allow for consumer choice	No case management for persons on "regular Medicaid"	Indiana State Department of Health; response to a complaint can take many months - too long for a follow-up	State/ Federal; from the consumer perspective, Medicaid seems to be the first funding source cut; no consumer lobbyist re: Medicaid
Disability Determination	Have to be poor, minimal income, rigid financial eligibility; need to have a disability that will last at least four years; disability determination is inconsistent across the state	Little to no information is available to consumers; have to rely on peers or advocates	DFR office; same issues as stated above related to accessibility	Denials are frequent; consumer must appeal	NA	Some case workers but caseloads are very large which is not conducive to individual consumer attention; this process can happen with a case worker never meeting you and not familiar with your disability	None that consumers are aware of; make any appeal to an administrative law judge who is an employee of Medicaid	State/Federal
Waivers	Information about eligibility for the Aged and Disabled Waiver (A & D) is inconsistent across the state (up to the interpretation of the Area Agency on Aging office (AAA) in that area)	Inconsistent; depend on peers for information; occasionally facilitated by a case worker	AAA office; can be referred by a CHOICE case worker	Through the AAA office; consumers frequently are on the waiting lists for a lengthy period of time and may find out they are not eligible	AAAs; too few providers who take Medicaid waiver funds	Too few case managers; AAA; some independent case workers; have opened up to providers which can be perceived as a conflict of interest by consumers; consumers would like more choice	AAA	State/Federal-depends on Medicaid money available
SSI	Must be impoverished; also must meet disability criteria (which is less restrictive than Indiana Medicaid criteria)	Social workers; depend a lot on peers and on advocates	Social Security Administration (SSA) office; many sites are not wheelchair accessible and/or on accessible transportation routes	Very lengthy and confusing; high denial rate for first application; have to have advocate to maneuver through the process	SSA	No case management; contacted once per year via a letter	Not aware of any	Federal

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Food and Nutrition-Food stamps	Same as Medicaid: do not have to have a disability; depends on income	Get a letter from Medicaid when you receive notification of disability (re)determination; get an application for food stamps with a Medicaid application	Medicaid office	Similar to Medicaid process except for the disability determination requirements	Multiple providers will take food stamps (actually a card now)	None	Not aware of any; Protection and Advocacy can become involved	State, Local
Employment	Must have disability determination; most Vocational Rehabilitation (VR) counselors require that the consumer go through a psychological evaluation; consumers hesitate to pursue employment for fear of losing current benefits	Through VR offices	Work One offices; VR offices; consumer can pursue employment independently	Depends on which route the consumer takes-can be influenced by special needs such as equipment and training	Multiple providers	None unless involved with a VR counselor	Equal Employment Opportunity Commission (EEOC) and Protection and Advocacy	Federal, State match